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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/660,211			ing Date 10/2003	To be Mailed
APPLICATION AS FILED — PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A			N/A	
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 = *				X \$ =		OR	X \$ =	
	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 = *				X \$ =			X \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	shee is \$2 addit	ts of pape 50 (\$125 onal 50 s	gs exceed 100 in size fee due for each in thereof. See CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								L ENTITY	OR		ER THAN ALL ENTITY
AMENDMENT	03/09/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 26	Minus	** 43	= 0		X \$ =		OR	X \$0=	0
	Independent (37 CFR 1.16(h))	* 2	Minus	***6	= 0		X \$ =		OR	X \$0=	0
	Application Size Fee (37 CFR 1.16(s))										
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	*	Minus	**	=		X \$ =		OR	X \$ =	
	Independent (37 CFR 1.16(h))	*	Minus	***	=		X \$ =		OR	X \$ =	
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".										TOTAL ADD'L FEE er:	
** If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20". /DEBORAH POLLARD/ *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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